

## From the Frontlines: Christian Health Associations Tackle WASH in Healthcare Facilities

In June 2018, representatives from five Christian Health Associations (CHAs) participated in a training on water, sanitation and hygiene (WASH) in healthcare facilities (HCF), hosted by the Africa Christian Health Association Platform (ACHAP) and conducted by Emory University. Participants who join the training are those responsible for quality assurance, infrastructure, financing, and the coordination of medical care. This was the first time these CHAs had received training on WASH in HCF. The primary objective of the training was to demonstrate the importance of WASH as it relates to the provision of quality of care. Additionally, participants were trained on the use of Emory University's WASHCon tool, which assesses WASH conditions in HCF. The training concluded with each CHA drafting an action plan. The newly minted WASH in HCF Champions also created a WhatsApp group to stay connected as they implemented WASH in HCF activities.

Returning to home, each pair of representatives conducted assessments in 10 to 15 HCF run by their CHA. Prioritizing needs, an incremental improvement plan was developed which was financed in part through seed funding (approximately \$6,000/CHA). In February 2019 at the ACHAP Biennial Meeting, the participants were reunited to report on progress, share experiences and discuss barriers and solutions. Key challenges identified were the limitations of funding and the need for further awareness in order to drive prioritization of the issue. The WASH in HCF Champions then presented their work to new CHAs and partners at the Biennial meeting.

Below are highlights on the activities to date from the trained CHAs (Ghana, Lesotho, Uganda Catholic, Zimbabwe) as well as two CHAs who separately have undertaken WASH in HCF activities (Uganda Protestant and Cameroon Baptist).

### **Zimbabwe Association of Church-Related Hospitals (ZACH)**

In Zimbabwe, 10 HCF were assessed, highlighting a number of gaps including the lack of improved water sources on site and inadequate hand hygiene facilities. At each HCF, ZACH met with the infection prevention and control (IPC) focal point and the environmental health technician (EHT) to sensitize them to WASH. ZACH procured supplies for hand hygiene and waste management, undertook basic repairs, and encouraged the HCF to initiate WASH activities using their own resources.

The focus on WASH acted as reminder of IPC for the HCF; IPC Committees are currently being strengthened or revived, and now incorporate WASH issues in their purview, adding EHTs to the committees. ZACH will integrate WASH into other programs as supportive of IPC, while also working with HCF to include WASH in the procurement budgets.



*Above: The toilets at the assessed ZACH facilities ranged from those in much need of rehabilitation to those meeting standards.  
(Photo Credit: Tinoziva Hungwe/ZACH)*

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### **Christian Health Association of Lesotho (CHAL)**

CHAL benefited from a major health infrastructure overhaul with support from the Millennium Challenge Corporation (MCC), thus the WASH infrastructure was better off than data reported from other assessments. However, gaps were identified in the 14 assessed HCF, particularly around the adequacy of hand hygiene facilities which required additional materials from CHAL. A WASH Day Celebration was held at each HCF, and WASH education was provided. In the future, CHAL will develop WASH protocols, integrate WASH in the facility work plans and operational plans and include WASH as a topic for in-service training.



Above: CHAL provided water storage tanks for one of the HCF.  
(Photo Credit: Mpho Ngwenya/ CHAL)

### **Christian Health Association of Ghana (CHAG)**

The team assessed 11 HCF that reflected the spread of church denominations within CHAG and across the three ecological belts of Ghana. The assessment revealed poor WASH conditions in the HCF, particularly related to the sanitation facilities, handwashing infrastructure and practices, and water sources. CHAG presented on the WASH assessment data to the HCF managers during their budgetary meeting, recommending WASH be explicitly incorporated in the budgets. Supplies like alcohol hand sanitizer and medical waste bins were distributed, and IEC materials were posted at HCF. One of the HCF is undertaking improvements using its own funding.

Looking ahead, the findings will be presented at the annual conference in June 2019. CHAG plans to conduct assessments in another 20 HCF, including water quality testing and is exploring funding opportunities to assess all CHAG HCF. Meanwhile, they sit on the joint committee to develop the national WASH policy with the Ministry of Health and UNICEF.

### **Uganda Catholic Medical Bureau (UCMB):**

UCMB conducted the WASH assessment in 14 HCF of the Tororo Archdiocese. The assessment found similar WASH gaps as the other CHAs and also indicated that few of the HCF had at least one staff who had undergone refresher training on hand hygiene and WASH concepts. UCMB procured 43 hand washing facilities, three water storage tanks and posters on hand hygiene and safe waste segregation.

Upon the dissemination of results at to the HCF, some of the managers took actions themselves, budgeting for supplies, renovating toilets and bathrooms, constructing mini / standard incinerator, organize refresher training, conducting a self-assessment of WASH, and reconsidering the facility design to accommodate people with disabilities.



Above: UCMB provided handwashing stations for those HCF where access to hand hygiene materials posed a challenge.  
(Photo Credit: Monicah Luwedde/ UCMB)



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UCMB will disseminate the findings to the ecclesiastical bishops to raise awareness and solicit support for subsequent project proposals. UCMB also plans to survey the impact of the interventions on patient satisfaction and lobby for funds to support further assessments of WASH. A new hospital undertaking will be introduced later this year, requiring each hospital to conduct water quality testing through the patient safety committees.



*Above: Before and after photos of water storage tanks at a UCMB health center (Photo Credit: Monicah Luwedde/ UCMB)*

### **Uganda Protestant Medical Bureau (UPMB)**

Although UPMB did not participate in the original training with ACHAP, it has been working with the Center for Global Safe WASH at Emory University for the past two years on WASH in HCF. In six target HCF, both CHA and public, UPMB conducted a knowledge, attitudes and practice (KAP) assessment of staff on WASH in HCF and IPC. Findings indicated the need for a comprehensive training for all staff members on WASH and IPC. A curriculum has recently been completed, which includes a course for healthcare workers and a separate course focused on facility managers. The training is slated for mid-2019 and those who complete the course will be receive a certificate for WASH and IPC.

### **Cameroon Baptist Convention Health Service (CBCHS)**

In 2003, CBCHS began the production of alcohol hand sanitizer in a single hospital. An additional four pilot HCF were added in 2012, scaling up to all CBCHS's HCF by 2017. To facilitate the process, the CBCHS Central Pharmacy now produces all alcohol hand sanitizer and distributes to HCF. A WASH baseline audit was conducted in 2017, following which the WHO framework for hand hygiene was introduced to HCF. CBCHS's records show a steady increase in the consumption of alcohol hand sanitizer since 2012. In the future, CBCHS plans to develop and produce IPC/WASH guidelines and protocols, source funding to automate the production of alcohol hand sanitizer and begin surveillance of hospital-acquired infections.



*Above: CBCHS demonstrated alcohol hand sanitizer application. (Photo Credit: CBCHS)*

For more information on the WASH in HCF training or activities through ACHAP, contact Lindsay Denny ([ldenny@GlobalWater2020.org](mailto:ldenny@GlobalWater2020.org)).